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PTO/SB/01 (10-00)

Approved for use through 10/31/2002: OMB 0651-0032
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

PU030282

First Named Inventor

Jill MacDonald Boyce et al.

COMPLETE IF KNOWN

Application Number

/

Filing Date

HEREWITH

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TECHNIQUE FOR BIT-ACCURATE FILM GRAIN SIMULATION

the specification of which

(Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

October 12, 2004

as United States Application Number or PCT International

Application Number

PCT/US2004/033713

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Country	Priority Not Claimed	Certified Copy Attached?	
					YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/511,026	October 14, 2003	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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PRINCETON	NJ	08543-5312	
Country	Telephone	Fax	
USA	609-734-6834	(609) 734 - 6888	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
Jill MacDonald

Family Name
or Surname Boyce

Inventor's Signature
Jill MacDonald Boyce

Date
10/28/04

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State
NJ

Country
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Citizenship
US

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Country
US

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
Cristina

Cristina

Family Name
or Surname Gomila
Gomila

Inventor's Signature
Cristina Gomila

Date
10/18/04

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State
NJ

Country
US

Citizenship
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Princeton

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NJ

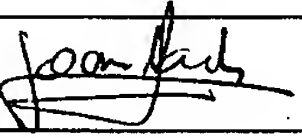

ZIP
08540

Country
US

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

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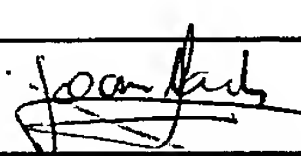
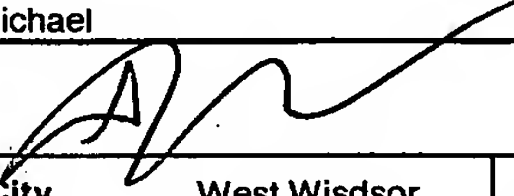
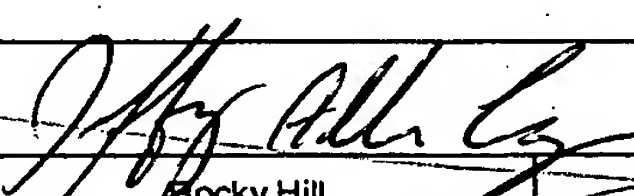
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Joan		Llach	
Inventor's Signature 		Date 10/18/04	
Residence: City	Princeton	State	NJ
		Country	USA
Citizenship ES			
Mailing Address 25C Chestnut Court			
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City	Princeton	State	NJ
		ZIP	08540
		Country	USA
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Alexandros Michael		Tourapis	
Inventor's Signature		Date	
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		Country	USA
Citizenship GR			
Mailing Address 29212 Heather Drive			
Mailing Address			
City	West Windsor	State	NJ
		Zip	08540
		Country	USA
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jeffrey Allen		Cooper	
Inventor's Signature 		Date 12/3/04	
Residence: City	Rocky Hill	State	NJ
		Country	08540
Citizenship US			
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Mailing Address			
City	Rocky Hill	State	NJ
		Zip	08540
		Country	USA

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Page 3 of 4

Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Joan		Llach	
Inventor's Signature 		Date 10/18/04	
Residence: City	Princeton	State	NJ
		Country	USA
Mailing Address		25C Chestnut Court	
Mailing Address			
City	Princeton	State	NJ
		ZIP	08540
		Country	USA
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Alexandros Michael		Tourapis	
Inventor's Signature 		Date 12/25/04	
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		Country	USA
Mailing Address		29212 Heather Drive	
Mailing Address			
City	West Windson	State	NJ
		Zip	08540
		Country	USA
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jeffrey Allen		Cooper	
Inventor's Signature 		Date 12/3/04	
Residence: City	Rocky Hill	State	NJ
		Country	08540
Mailing Address		11 Toth Lane	
Mailing Address			
City	Rocky Hill	State	NJ
		Zip	08540
		Country	USA

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Page 4 of 4

Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Peng		Yin	
Inventor's Signature <i>Peng Y</i>		Date 11/04/2004	
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		Country	USA
Citizenship		CN	
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Mailing Address			
City	West Windsor	State	NJ
		ZIP	08540
		Country	USA
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	

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